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NIOSH List of Hazardous Drugs in Healthcare Settings, 2020

DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
National Institute for Occupational Safety and Health



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2020-**xxx**

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List of Acronyms

| | |
|-------|---|
| AHFS | American Hospital Formulary Service |
| CFR | Code of Federal Regulations |
| FDA | Food and Drug Administration |
| IARC | International Agency for Research on Cancer |
| MSHI | Manufacturer's special handling information |
| NIOSH | National Institute for Occupational Safety and Health |
| NTP | National Toxicology Program |

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Drugs Considered Hazardous

Introduction

Healthcare workers may be occupationally exposed to drugs and may experience adverse health effects as a result. The NIOSH Alert: *Preventing Occupational Exposures to Antineoplastic and Other Hazardous Drugs in Healthcare Settings* was published in September 2004, <http://www.cdc.gov/niosh/docs/2004-165/>. The Alert contained a sample list of drugs identified by NIOSH as hazardous to workers in healthcare settings. NIOSH published updated Lists in 2010, 2012, 2014, 2016, and now this in 2020.

This document supersedes previous versions of the *List* and presents the current list of drugs determined by NIOSH to be hazardous.

The *NIOSH List of Hazardous Drugs in Healthcare Settings (List)* assists employers in providing safe and healthy workplaces by identifying drugs approved by the FDA Center for Drug Evaluation and Research (CDER) that have intrinsic properties that meet the NIOSH definition of a hazardous drug. The *NIOSH List* creates no legal obligation for employers; it is advisory in nature and informational in content.

CAUTION: Drugs purchased and used by a facility may have entered the marketplace after the list below was assembled. Therefore, this list may not be all-inclusive and employers should consider creating a facility-specific hazardous drug list.

Defining Hazardous Drugs

NIOSH has formalized the methodology NIOSH uses to guide the addition of drugs to or removal of drugs from the List, in a document entitled *Procedures for Developing the NIOSH List of Hazardous Drugs in Healthcare Settings (Procedures)*.¹

As stated in the *Procedures*, NIOSH defines a hazardous drug as a drug that is:

¹ NIOSH [2020]. *Procedures for Developing the NIOSH List of Hazardous Drugs in Healthcare Settings*. By Whittaker C, Ovesen JL, MacKenzie BA, Hartley T, Berry KA, Piacentino J. Cincinnati, OH: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication Number 2020-xxx

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1. Approved for use in humans² by the FDA-CDER;³ and
2. Not otherwise regulated by the U.S. Nuclear Regulatory Commission;⁴ and
3. Either:
 - a. Is accompanied by prescribing information in the “package insert”⁵ that specifies special handling information (Manufacturer Special Handling Information-MSHI) to protect workers handling the drug; or
 - b. Is identified as a carcinogenic hazard, developmental hazard, reproductive hazard, genotoxic hazard, or other health hazard by exhibiting one or more of the following toxicity criteria in humans, animal models, or *in vitro* systems:
 - carcinogenicity;
 - developmental toxicity (including teratogenicity);
 - reproductive toxicity;
 - genotoxicity;
 - organ toxicity at low doses;⁶ or
 - structure and toxicity profile that mimics existing drugs determined hazardous by exhibiting any one of the previous five toxicity types;⁷

unless the drug also exhibits a molecular property⁸ that may limit the potential for adverse health effects in healthcare workers from exposure to the drug.

² Although only drugs approved by the FDA for use in humans are included in the definition of hazardous drug, some of those drugs may be used in veterinary settings for treatment of animals and may be a hazard for veterinary care workers.

³ 21 U.S.C. 301 *et seq.*

⁴ 10 CFR Parts 19, 20, and 35. See <https://www.nrc.gov/materials/miau/med-use.html>.

⁵ See Drug Advertising: A Glossary of Terms at

<https://www.fda.gov/drugs/resourcesforyou/consumers/prescriptiondrugadvertising/ucm072025.htm>. “Prescribing information is also called product information, product labeling, or the package insert (“the PI”). It is generally drafted by the drug company and approved by the FDA. This information travels with a drug as it moves from the company to the pharmacist. It includes the details and directions healthcare providers need to prescribe the drug properly. It is also the basis for how the drug company can advertise its drug. The prescribing information includes such details about the drug as: its chemical description; how it works; how it interacts with other drugs, supplements, foods, and beverages; what condition(s) or disease(s) it treats; who should not use the drug; serious side effects, even if they occur rarely; commonly occurring side effects, even if they are not serious; effects on specific groups of patients, such as children, pregnant women, or older adults and how to use it in these populations.”

⁶ All drugs have toxic side effects, but some exhibit toxicity at low doses. The level of toxicity reflects a continuum from relatively nontoxic to production of toxic effects in patients at low doses (for example, a few milligrams or less). For example, a daily therapeutic dose of 10 mg/ day or a dose of 1 mg/kg per day in laboratory animals that produces serious organ toxicity, developmental toxicity, or reproductive toxicity has been used by the pharmaceutical industry to develop occupational exposure limits (OELs) of less than 10 µg/m³ after applying appropriate uncertainty factors [Sargent and Kirk 1988; Naumann and Sargent 1997; Sargent et al. 2002]. OELs in this range are typically established for potent or toxic drugs in the pharmaceutical industry. Under all circumstances, an evaluation of all available data should be conducted to protect health care workers.

⁷ NIOSH [2004]. Preventing occupational exposures to antineoplastic and other hazardous drugs in health care settings. By Burroughs GE, Connor TH, McDiarmid MA, Mead KR, Power LA, Reed LD, Coyle BJ, Hammond DR, Leone MM, Polovich M, Sharpnack DD. Cincinnati, OH: U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control and Prevention, National Institute for Occupational Safety and Health, DHHS (NIOSH) Publication No. 2004-165.

⁸ Properties of a drug molecule that may limit adverse effects in healthcare workers are typically chemical, physical and structural properties that affect its absorption, distribution within the body, metabolism, or excretion e.g., chemical structure, molecular

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Determining Whether a Drug Is Hazardous

NIOSH uses a sequential approach for assessing and interpreting scientific information in order to determine whether an FDA-approved drug meets the NIOSH definition of hazardous drug. NIOSH's approach to evaluating the hazard potential of a drug includes: (1) reviewing FDA databases to identify drugs that have the potential to meet the NIOSH definition of hazardous drug; (2) reviewing molecular properties and information in the manufacturer-provided drug package insert to identify information relevant to making a determination about placing a drug on the *List*, excluding a drug from the *List*, or removing a drug from the *List*; (3) assessing, integrating, and synthesizing evidence from human, animal, and *in vitro* studies of drug toxicity; (4) using molecular property, toxicity and hazard characterization criteria established in the *Procedures* in making a decision to place a drug on the *List* or to exclude a drug from the *List*; and (5) allowing for reconsideration of a NIOSH decision to place a drug on the *List* or to remove a drug from the *List*.

The methodology used by NIOSH to evaluate chemical properties, pre-clinical information, and clinical information about each drug is detailed in the *Procedures*.

Developing a Facility-Specific List of Hazardous Drugs

The NIOSH *List* is an aid designed to enable employers to identify which drugs handled by employees are considered by NIOSH to be hazardous drugs. Because new drugs and new formulations are continuously brought to market between NIOSH's periodic updates hazardous drug evaluation should be a continual process. Employers should establish their own procedures to identify and evaluate new drugs as they enter their workplace and, when appropriate, reassess their presence on hazardous drug lists as toxicological data become available to support re-categorization.

In developing a facility-specific list of hazardous drugs, workplaces may consider facility-specific criteria, including the specific product formulations and packaging within their facility, which NIOSH cannot utilize when developing the *List*. In addition to the NIOSH *List*, non-governmental organizations have developed various approaches to identifying and classifying hazardous drugs [Chaffee *et al.* 2010; Badry *et al.* 2013; Kaestli *et al.* 2013]. When creating a facility specific list some facilities may find they handle investigational drugs, which have not been approved by FDA-CDER or reviewed by NIOSH. Toxicological data may be incomplete or unavailable for investigational drugs. If the mechanism of action suggests that there may be a concern, it is prudent to handle them as hazardous drugs until adequate information becomes available to exclude them.

A site-specific risk assessment is outside of the scope of the *List* and includes consideration of dose, potency, and exposure potential during formulation and use from events such as: routine handling,

weight or mass. See Clementi F, Fumagalli G. *Molecular Pharmacology*. Hoboken, NJ: Wiley & Sons;2015; Di L, Kerns EH. *Drug-Like Properties: Concepts, Structure, Design, and Methods*. Oxford, UK: Elsevier;2016; Mattson P, Kihlberg J. How big is too big for cell permeability. *J Med Chem*. 2017;60:1662-1664. <https://doi.org/10.1021/acs.jmedchem.7b00237>.

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compounding, spills, broken device, needle stick, inadvertent contact, or surface contamination. When using a drug on the *List*, NIOSH encourages employers to do a site-specific risk assessment that informs effective risk management procedures. More information about managing the risk of handling hazardous drugs can be found in *Managing Hazardous Drug Exposures: Information for Health Care Settings* (NIOSH, 2020). A facility-specific list along with *Managing Hazardous Drug Exposures: Information for Health Care Settings* [NIOSH 2020] and other guidance from American Society of Health System Pharmacist (ASHP), United States Pharmacopeia (USP), Oncology Nursing Society (ONS) and other organizations, can help employers establish effective hazardous drug management procedures specific to their workplace

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NIOSH List of Hazardous Drugs in Healthcare Settings 2020

NIOSH performed a hazard identification and characterization of each drug on the *List*, in accordance with the NIOSH *Procedures for Developing the NIOSH List of Hazardous Drugs in Healthcare Settings*.

The 2020 *List* supersedes previous versions.

2020 Hazardous Drugs List Changes

The 2020 *List* adds 16 drugs, three of which have special handling⁹ information from the manufacturers and removes five drugs¹⁰ from the list. Drugs reviewed for this update were new drug approvals or received safety related new warnings from FDA in the period between January 2014 and December 2015. In addition to these updates, the tables categorizing hazardous drugs have been reorganized and are discussed below.

Table 1 now includes drugs that meet the NIOSH definition of a hazardous drug and contain MSHI in the package insert; and/or are classified by the NTP as “known to be a human carcinogen,” or classified by IARC as “carcinogenic” or “probably carcinogenic.” In the 2016 *List* this table identified antineoplastic drugs, however, in this update not all of the drugs on Table 1 are antineoplastic drugs.

Table 2 contains drugs that meet one or more of the NIOSH definition of a hazardous drug but are not drugs which have MSHI or are classified by the NTP as “known to be a human carcinogen,” or classified by the IARC as “carcinogenic” or “probably carcinogenic,” some of which also have adverse reproductive effects for populations at risk. This table now also includes drugs that only meet the NIOSH criteria as a developmental (including teratogenicity) and/or reproductive hazard. In the 2016 update of the *List* this table did not include drugs that only posed a developmental and/or reproductive hazard.

In the 2016 *List*, Table 3 provided a list of drugs that met the NIOSH criteria of a reproductive hazard (damaging to a male or female person’s ability to conceive or carry to term an offspring) or developmental hazard (able to cause disruption in the development of unborn children including teratogenic outcomes). In this 2020 *List*, those drugs that only meet NIOSH’s criteria as a developmental and/or reproductive hazard are identified in the supplemental information column with a blue notification; a separate Table is no longer provided.

⁹ When NIOSH becomes aware of recently approved drugs that include MSHI, it adds them to the *List* immediately. The notification of these additions are posted to the NIOSH website at: <https://www.cdc.gov/niosh/docs/2016-161/default.html>. These drugs would have been officially on the previous version of the list from the date of the notification and are only now being added into the publication.

¹⁰ When NIOSH removes a drug from the *List*, the notification of these removals are posted to the NIOSH website at: <https://www.cdc.gov/niosh/docs/2016-161/default.html>

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In the 2016 *List*, Table 4 provided a list of the drugs removed from the *List*. In this 2020 *List*, a new section identifies changes to the placement of drugs on the *List*, including drugs that are no longer considered hazardous and those that have been moved from one table to another.

In the 2016 *List*, Table 5 provided information on recommended exposure controls for hazardous drugs based on formulations. NIOSH has removed the table from the *List*. Risk management is outside the scope of the *List* document. NIOSH addresses risk management issues in **Managing Hazardous Drug Exposures: Information for Healthcare Settings** which includes information on using engineering controls, administrative controls and personal protective equipment for working with hazardous drugs in healthcare settings. It is available on the NIOSH website at: www.cdc.gov/niosh/topics/hazdrug/.

In previous *Lists*, the supplemental information column has contained information that may be useful for individual drugs, including pregnancy categories. This information may not have been related to NIOSH's decision to place the drug on the *List*. As of 2015, FDA no longer uses the letter pregnancy categories for drugs and NIOSH has removed that information from the supplemental information column. For drugs listed prior to this 2020 *List*, all other supplemental information has been retained, though that information may not be related to the listing of the drug. For drugs listed in this 2020 *List*, NIOSH has identified the relevant hazard criteria of the drug in the supplemental information column.

CAUTION: Drugs purchased and used by a facility may have entered the marketplace after the list below was assembled. This list is not all-inclusive. Drugs reviewed for this update were new drug approvals or received safety related new warnings from FDA in the period between January 2014 and December 2015.

More recent information on drugs, including updated product inserts and information on new safety related changes to labels, can be found at:

FDA Approved Drugs:
www.accessdata.fda.gov/scripts/cder/daf/index.cfm

FDA Safety-related Labeling Changes:
www.accessdata.fda.gov/scripts/cder/safetylabelingchanges/

DailyMed:
dailymed.nlm.nih.gov

DrugBank:
www.drugbank.ca

The National Library of Medicine Drug Portal:
druginfo.nlm.nih.gov

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NIOSH List of Hazardous Drugs in Healthcare Settings 2020

The drugs in Table 1 meet the following classification criteria:

Drugs which contain manufacturers' special handling information; and/or

Drugs which meet the NIOSH definition of a hazardous drug and are classified by the NTP as "known to be a human carcinogen," and/or classified by the IARC as "carcinogenic" or "probably carcinogenic"

Many of these drugs are cytotoxic and the majority are hazardous to males or females who are actively trying to conceive, women who are pregnant or may become pregnant, and women who are breast feeding, because the drugs may be excreted in breast milk.

Not all drugs in Table 1 are antineoplastic drugs.

Drugs reviewed for this update were new drug approvals or received safety related new warnings from FDA in the period between January 2014 and December 2015.

Drugs underlined and in red font were added in 2020.

MSHI = manufacturer's special handling information

Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as "known to be a human carcinogen," and/or classified by the IARC as "carcinogenic" or "probably carcinogenic."

| Drug | AHFS classification | MSHI | Supplemental Information ¹¹ |
|--------------------------|-----------------------------|------|--|
| trastuzumab emtansine | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to mertansine (emtansine) |
| altretamine | 10:00 antineoplastic agents | yes | |
| amsacrine | NA antineoplastic agents | yes | IARC Group 2B |
| arsenic trioxide | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen |
| azacitidine | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |

¹¹ Drugs identified as IARC Group 2B are listed in Table 1 because they have MSHI.

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Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.”

| Drug | AHFS classification | MSHI | Supplemental Information ¹¹ |
|---------------------|------------------------------------|------|---|
| azathioprine | 92:44 immunosuppressant | yes | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| belinostat | 10:00 antineoplastic agents | yes | May cause teratogenicity and/or embryo-fetal lethality because it is a genotoxic drug and targets actively dividing cells |
| bendamustine | 10:00 antineoplastic agents | yes | Cytotoxic; Developmental toxicity |
| bleomycin | 10:00 antineoplastic agents | yes | IARC Group 2B |
| bortezomib | 10:00 antineoplastic agents | yes | |
| brentuximab vedotin | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to vedotin |
| busulfan | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen |
| cabazitaxel | 10:00 antineoplastic agents | yes | |
| capecitabine | 10:00 antineoplastic agents | yes | Metabolized to 5-fluorouracil |
| carboplatin | 10:00 antineoplastic agents | yes | |
| carmustine | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| chlorambucil | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| chloramphenicol | 8:12:08 chloramphenicols | | IARC Group 2A carcinogen; NTP “known to be human carcinogen” |
| cidofovir | 8:18:32 nucleoside and nucleotides | yes | |
| cisplatin | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| cladribine | 10:00 antineoplastic agents | yes | |
| clofarabine | 10:00 antineoplastic agents | yes | |
| cyclophosphamide | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| cyclosporine | 92:44 immunosuppressive agents | | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| cytarabine | 10:00 antineoplastic agents | yes | |
| dacarbazine | 10:00 antineoplastic agents | yes | IARC Group 2B |

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Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.”

| Drug | AHFS classification | MSHI | Supplemental Information ¹¹ |
|---|-----------------------------|------|--|
| dactinomycin | 10:00 antineoplastic agents | yes | |
| dasatinib | 10:00 antineoplastic agents | yes | |
| daunorubicin | 10:00 antineoplastic agents | yes | IARC Group 2B; AKA daunomycin |
| decitabine | 10:00 antineoplastic agents | yes | |
| dexrazoxane | 92:56 protective agents | yes | Secondary malignancies observed in patients treated long term with Razoxane (a racemic mixture containing dexrazoxane); Genotoxic <i>in vitro</i> and <i>in vivo</i> ; in laboratory studies, Testicular atrophy observed at or below the human dose |
| diethylstilbestrol | NA | | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| docetaxel | 10:00 antineoplastic agents | yes | |
| doxorubicin | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| enfortumab vedotin | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to vedotin; Cytotoxic; Developmental toxicity |
| epirubicin | 10:00 antineoplastic agents | yes | |
| estramustine | 10:00 antineoplastic agents | yes | |
| estrogen/ progesterone combinations | 68:12 contraceptives | | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| estrogens, conjugated | 68:12 contraceptives | | NTP “known to be human carcinogen”; Black Box warning for endometrial cancer and cardiovascular risks; Long-term use in women and laboratory studies increases frequency of several cancers |
| estrogens, esterified | 68:12 contraceptives | | NTP “known to be human carcinogen”; Black Box warning for endometrial cancer and cardiovascular risks |
| etoposide | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen |
| everolimus | 10:00 antineoplastic agents | yes | |
| floxuridine | 10:00 antineoplastic agents | yes | |
| fludarabine | 10:00 antineoplastic agents | yes | |
| fluorouracil | 10:00 antineoplastic agents | yes | |

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Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.”

| Drug | AHFS classification | MSHI | Supplemental Information ¹¹ |
|---------------------------------------|------------------------------------|------|---|
| ganciclovir | 8:18:32 nucleosides nucleotides | yes | |
| gemcitabine | 10:00 antineoplastic agents | yes | |
| gemtuzumab ozogamicin | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to ozogamicin; Cytotoxic; Developmental toxicity |
| hydroxyurea | 10:00 antineoplastic agents | yes | Special warning on handling bottles and capsules |
| idarubicin | 10:00 antineoplastic agents | yes | |
| ifosfamide | 10:00 antineoplastic agents | yes | |
| imatinib | 10:00 antineoplastic agents | yes | |
| inotuzumab ozogamicin | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to ozogamicin; Cytotoxic; Developmental toxicity |
| irinotecan | 10:00 antineoplastic agents | yes | |
| ixazomib | 10:00 antineoplastic agents | yes | Male and female patients of childbearing potential must use effective contraceptive measures during and for 3 months following treatment |
| ixabepilone | 10:00 antineoplastic agents | yes | |
| lenalidomide | 92:20 biologic response modulators | yes | Analog of thalidomide; FDA Black box warnings for limb abnormalities; in laboratory studies, caused thalidomide-type limb defects in monkey offspring |
| lomustine | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| mechlorethamine | 10:00 antineoplastic agents | yes | |
| melphalan | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| mercaptopurine | 10:00 antineoplastic agents | yes | |
| methotrexate | 10:00 antineoplastic agents | yes | |
| mitomycin | 10:00 antineoplastic agents | yes | IARC Group 2B |
| mitotane | 10:00 antineoplastic agents | yes | |
| mitoxantrone | 10:00 antineoplastic agents | yes | IARC Group 2B |
| nelarabine | 10:00 antineoplastic agents | yes | |
| omacetaxin | 10:00 antineoplastic agents | yes | |

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Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.”

| Drug | AHFS classification | MSHI | Supplemental Information ¹¹ |
|--|--|------|--|
| oxaliplatin | 10:00 antineoplastic agents | yes | |
| paclitaxel | 10:00 antineoplastic agents | yes | |
| panobinostat | 10:00 antineoplastic agents | yes | Special warnings on contraception for females while taking and one month post- treatment |
| pemetrexed | 10:00 antineoplastic agents | yes | |
| pentostatin | 10:00 antineoplastic agents | yes | |
| polatuzumab vedotin | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to vedotin; Cytotoxic; Developmental toxicity |
| pomalidomide | 10:00 antineoplastic agents | yes | Analog of thalidomide; Females of reproductive potential must use 2 forms of contraception or continuously abstain from heterosexual sex during and for 4 weeks after stopping treatment |
| pralatrexate | 10:00 antineoplastic agents | yes | |
| procarbazine | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| romidepsin | 10:00 antineoplastic agents | yes | |
| streptozocin | 10:00 antineoplastic agents | yes | IARC Group 2B |
| tamoxifen | 10:00 antineoplastic agents; 68.16.12 estrogen agonist-antagonist | | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| temozolomide | 10:00 antineoplastic agents | yes | |
| temsirolimus | 10:00 antineoplastic agents | yes | |
| teniposide | 10:00 antineoplastic agents | yes | IARC Group 2A carcinogen |
| thalidomide | 92:20 biologic response modulators | yes | |
| thioguanine | 10:00 antineoplastic agents | yes | |
| thiotepa | 10:00 antineoplastic agents | yes | IARC Group 1 carcinogen; NTP “known to be human carcinogen” |
| topotecan | 10:00 antineoplastic agents | yes | |
| trabectedin | 10:00 antineoplastic agents | yes | Cytotoxic; Genotoxic |
| trastuzumab deruxtecan | 10:00 antineoplastic agents | yes | Monoclonal antibody conjugated to deruxtecan; Cytotoxic |

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Table 1. Drugs that contain MSHI in the package insert and/or meet the NIOSH definition of a hazardous drug and are classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.”

| Drug | AHFS classification | MSHI | Supplemental Information¹¹ |
|----------------|-------------------------------------|-------------|--|
| trifluridine | 10:00 antineoplastic agents | yes | Embryo-fetal lethality and embryo-fetal toxicity at doses lower than or similar to exposures at the recommended human dose |
| uracil mustard | NA | yes | IARC Group 2B |
| valganciclovir | 8:18:32 nucleosides and nucleotides | yes | |
| valrubicin | 10:00 antineoplastic agents | yes | |
| vandetanib | 10:00 antineoplastic agents | yes | |
| vinblastine | 10:00 antineoplastic agents | yes | |
| vincristine | 10:00 antineoplastic agents | yes | |
| vinorelbine | 10:00 antineoplastic agents | yes | |
| vorinostat | 10:00 antineoplastic agents | yes | Adverse embryo-fetal effects at less than the recommended human dose |

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The drugs in **Table 2** meet the NIOSH definition of a hazardous drug but are not drugs which have MSHI and are not classified by the NTP as “known to be a human carcinogen,” and/or classified by the IARC as “carcinogenic” or “probably carcinogenic.” These drugs exhibit one or more of the types of toxicity described in the NIOSH definition of hazardous drug. Some of these drugs may present an occupational hazard to males or females who are actively trying to conceive, women who are pregnant or may become pregnant, and women who are breast feeding, because they may be present in breast milk.

Drugs reviewed for this update were new drug approvals or received safety related new warnings from FDA in the period between January 2014 and December 2015.

Drugs underlined and in red font were added in 2020.

Table 2. Drugs that meet the NIOSH definition of a hazardous drug but are not drugs that have MSHI or are classified by the NTP as “known to be a human carcinogen,” or classified by the IARC as “carcinogenic” or “probably carcinogenic.” (some also may have adverse development and/or reproductive effects)

| Drug | AHFS classification | Supplemental Information |
|---------------------|--|--|
| abacavir | 8:18.08.20 nucleoside and reverse transcriptase inhibitors | Malignant tumors observed in male and female mice and rats; Genotoxic in vivo micronucleus test. |
| abiraterone | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Women who are pregnant or women who may be pregnant should not handle without protection (e.g., gloves) |
| acitretin | 88:04 vitamin A | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| afatinib | 10:00 antineoplastic agents | Special warnings on contraception for females while taking and two weeks post- treatment |
| afibercept | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Embryotoxic and teratogenic in rabbits at exposure levels lower than human exposures at the recommended dose, with increased incidences of external, visceral, and skeletal fetal malformations |
| alefacept | 84:92 skin and mucous membrane agents, miscellaneous | Increased frequency of malignancies observed in treated patients |
| alitretinoin | 84:92 skin and mucous membrane agents, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| ambrisentan | 24:12:92 vasodilating agents, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |

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Table 2. Drugs that meet the NIOSH definition of a hazardous drug but are not drugs that have MSHI or are classified by the NTP as “known to be a human carcinogen,” or classified by the IARC as “carcinogenic” or “probably carcinogenic.” (some also may have adverse development and/or reproductive effects)

| Drug | AHFS classification | Supplemental Information |
|---------------------|--|--|
| anastrozole | 68:16.04 antiestrogens; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| apomorphine | 28:36.20.08 Nonergot-derivative dopamine receptor agonists | Genotoxic in several in vitro assays |
| axitinib | 10:00 antineoplastic agents | Teratogenic, embryotoxic and fetotoxic in mice at exposures lower than human exposures |
| bexarotene | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| bicalutamide | 10:00 antineoplastic agents | |
| <u>blinatumomab</u> | 10:00 antineoplastic agents | Organ Toxicity at Low Dose - Neurotoxicity |
| bosentan | 24:12:92 vasodilating agents, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| bosutinib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| cabergoline | 28:36:20:04 ergot-derivative dopamine receptor agonists | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| cabozantinib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Embryo lethal in rats at exposures below the recommended human dose |
| carbamazepine | 28:12:92 anticonvulsants, miscellaneous | Black Box warning for aplastic anemia; Congenital malformations in offspring of mothers who took drug; Rapid transplacental passage |
| carfilzomib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Special warnings on contraception while taking and two weeks post-treatment |
| <u>ceritinib</u> | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Developmental toxicity |
| cetrorelix | 92:40 gonadotropin-releasing hormone antagonists | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| choriogonadotropin | 68:18 gonadotropins | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Developmental toxicity |
| <u>clobazam</u> | 28:12.08 benzodiazapines | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Developmental toxicity; Reproductive toxicity-male; Reproductive toxicity-female |
| clomiphene | 68:16:12 estrogen agonist-antagonists | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| clonazepam | 28:12:08 benzodiazapines | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| <u>cobimetinib</u> | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Developmental toxicity; |

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Table 2. Drugs that meet the NIOSH definition of a hazardous drug but are not drugs that have MSHI or are classified by the NTP as “known to be a human carcinogen,” or classified by the IARC as “carcinogenic” or “probably carcinogenic.” (some also may have adverse development and/or reproductive effects)

| Drug | AHFS classification | Supplemental Information |
|----------------------------|--|---|
| | | Reproductive toxicity-male; Reproductive toxicity-female |
| colchicine | 92:16 antigout agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| crizotinib | 10:00 antineoplastic agents | |
| dabrafenib | 10:00 antineoplastic agents | Special warnings on contraception for females while taking and two weeks post-treatment |
| deferiprone | 64:00 Heavy metal antagonists | Genotoxic <i>in vitro</i> and <i>in vivo</i> |
| degarelix | 68:18.04 antigonadotropins; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| <u>dihydroergotamine</u> | 12:16.00 sympatholytic (adrenergic blocking) agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity |
| dinoprostone | 76:00 oxytocics | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| divalproex | 28:12:92 anticonvulsants, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Black box warning on embryo-fetal death or severe birth defects; Recommend effective contraception for females during therapy and for seven months after treatment; Present in semen; No sperm donation during and three months post-treatment |
| dronedarone | 24:04:04 antiarrhythmics | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| dutasteride | 92:08 5-alpha reductase inhibitors | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| entecavir | 8:18:32 nucleosides and nucleotides | |
| enzalutamide | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Embryo-fetal toxicity in mice at exposures that were lower than in patients receiving the recommended dose |
| ergonovine/methylegonovine | 76:00 oxytocics | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity – third trimester |
| eribulin | 10:00 antineoplastic agents | |
| erlotinib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| eslicarbazepine | 28:12:92 anticonvulsants, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| estradiol | 68:16:04 estrogens | Black Box warning for malignant neoplasms; Increased risk of endometrial cancer, breast cancer, and ovarian cancer; in laboratory studies, increased frequency of carcinomas of the breast, uterus, cervix, vagina, testis, and liver; Present in breast milk |
| estropipate | 68:16:04 estrogens | Black Box warning for endometrial carcinoma in postmenopausal women and use during pregnancy |

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| Drug | AHFS classification | Supplemental Information |
|-------------------------|---|--|
| exemestane | 68.16.04 Antiestrogens; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| <u>exenatide</u> | 68:20.06 incretin mimetics | Carcinogenicity; Developmental toxicity |
| finasteride | 92:08 5-alpha reductase | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| fingolimod | 92:20 biologic response modifiers | In laboratory studies, increased malformations and embryo-fetal deaths at less than the RHD; Malignant lymphomas observed in male and female mice |
| fluconazole | 8:18.08 azoles | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| fluoxymesterone | 68:08 androgens | Tumors in mice and rats and possibly humans |
| flutamide | 10:00 antineoplastic agents | Indicated only for men |
| fosphenytoin | 28:12.12 hydantoins | Metabolized to phenytoin |
| fulvestrant | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| ganirelix | 92:40 gonadotropin- releasing hormone antagonists | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| gonadotropin, chorionic | 68:18 gonadotropins | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| goserelin | 68:16.08 gonadotropins; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| histrelin | 68:16.08 gonadotropins; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Can cause fetal harm when administered to a pregnant patient with the possibility of spontaneous abortion |
| icatibant | 92:32 complement inhibitors | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| <u>isotretinoin</u> | 84:92.00 misc. skin and mucous membrane agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity |
| <u>ivabradine</u> | 24:04.90 misc. cardiac agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity |
| leflunomide | 92:36 disease-modifying antirheumatic agents | Teratogenic in laboratory studies at 1/10 HD; Marked postnatal survival at 1/100 HD; Severe liver injury reported in patients; Carcinogenicity observed at doses below HD |
| <u>lenvatinib</u> | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity |
| letrozole | 68.16.04 Antiestrogens; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| leuprolide | 68:16.08 gonadotropins; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| liraglutide recombinant | 68:20.06 incretin mimetics | Black Box warning for thyroid C-cell tumors, with supporting evidence in laboratory studies; In laboratory studies, teratogenic at or below the MRHD |

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Table 2. Drugs that meet the NIOSH definition of a hazardous drug but are not drugs that have MSHI or are classified by the NTP as “known to be a human carcinogen,” or classified by the IARC as “carcinogenic” or “probably carcinogenic.” (some also may have adverse development and/or reproductive effects)

| Drug | AHFS classification | Supplemental Information |
|-----------------------------|---|---|
| lomitapide | 24:06:92 antilipemic agents, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| macitentan | 48:48 vasodilating agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| medroxyprogesterone acetate | 68:32 progestins | Only met the NIOSH criteria as a developmental and/or reproductive hazard; IARC Group 2B |
| megestrol | 10:00 antineoplastic agents | Nursing should be discontinued if megestrol is required; Women at risk of pregnancy should avoid exposure |
| menotropins | 68:18 gonadotropins | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| methimazole | 68:36:08 antithyroid agents | Appears in human breast milk |
| methyltestosterone | 68:08 androgens | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| mifepristone | 76:00 oxytocics | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| miltefosine | 8:30:92 misc. antiprotozoals | Only met the NIOSH criteria as a developmental and/or reproductive hazard; Developmental toxicity; Reproductive toxicity – male; Reproductive toxicity – female |
| mipomersen | 24:06:92 antilipemic agents, miscellaneous | Black box warning of hepatotoxicity |
| misoprostol | 56:28.28 prostaglandins | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| mycophenolate mofetil | 92:44 immunosuppressive agents | Black Box warning for embryo fetal toxicity, malignancies and serious infections; Increased risk of first- trimester pregnancy loss and increased risk of congenital malformations; Special warning: tablets should not be crushed and capsules should not be opened or crushed. Avoid inhalation or direct contact with skin or mucous membranes of the powder contained in capsules and oral suspension (before or after constitution). If such contact occurs, wash thoroughly with soap and water; rinse eyes with plain water. |
| mycophenolic acid | 92:44 immunosuppressive agents | Black Box warning for embryo fetal toxicity, malignancies and serious infections; Increased risk of first- trimester pregnancy loss and increased risk of congenital malformations; Black Box warning for lymphomas and other malignancies; genotoxic <i>in vitro</i> and <i>in vivo</i> |
| nafarelin | 68:18 gonadotropins | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| nevirapine | 8:18.08.16 nonnucleoside reverse transcriptase inhibitors | In laboratory studies, hepatocellular adenomas and carcinomas at doses lower than human dose |

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| Drug | AHFS classification | Supplemental Information |
|-----------------------------|---|---|
| nilotinib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| olaparib | 10:00 antineoplastic agents | Genotoxicity; Developmental toxicity |
| ospemifene | 68:16:12 estrogen agonist-antagonists | Black box warning on increased risk of endometrial cancer in certain populations; Risk of adverse outcomes during pregnancy and labor |
| oxcarbazepine | 28:12:92 anticonvulsants, miscellaneous | Tumors observed in laboratory studies at 1/10 MRHD |
| oxytocin | 76:00 oxytocics | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity – third trimester |
| palifermin | 84:16 cell stimulants and proliferants | Potential for stimulation of tumor growth |
| pamidronate | 92:24 bone resorption inhibitors | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| paroxetine | 28:16:04:20 selective serotonin uptake inhibitors | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| pasireotide | 68:29:04 somatostatin agonists | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| pazopanib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| peginesatide | 20:16 hematopoietic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| pentetate calcium trisodium | NA | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| phenoxybenzamine | 12:16:04:04 non-selective alpha-andrenergic blocking agents | IARC Group 2B |
| phenytoin | 28:12:12 hydantoins | IARC Group 2B |
| pipobroman | NA | |
| plerixafor | 20:16 hematopoietic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| ponatinib | 10:00 antineoplastic agents | |
| progesterone | 68:32 progestins | IARC Group 2B |
| progestins | 68:12 contraceptives | |
| propylthiouracil | 68:36:08 antithyroid agents | IARC Group 2B |
| rалoxifene | 68:16:12 estrogen agonists-antagonists | Abortion and developmental abnormalities seen at low doses in laboratory studies; Evidence of tumors at low doses in laboratory studies |
| rasagiline | 28:36 antiparkinsonian agents | |
| regorafenib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Black box warning on severe and sometimes fatal hepatotoxicity; Total loss of pregnancy at doses lower than recommended human dose |

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| Drug | AHFS classification | Supplemental Information |
|-------------------------|---|---|
| ribavirin | 8:18:32 nucleosides and Teratogenic and embryotoxic nucleotides | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| riociguat | 48:48 vasodilating agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| sirolimus | 92:44 immunosuppressive agents | AKA rapamycin; Increased risk of lymphomas and other malignancies; Embryotoxic and fetotoxic at 0.2 HD |
| <u>sonidegib</u> | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity; Reproductive toxicity – female |
| sorafenib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| spironolactone | 24:32.20 mineralocorticoid receptor antagonists | Black box warning for tumorigenicity in laboratory studies |
| sunitinib | 10:00 antineoplastic agents | |
| tacrolimus | 92:44 immunosuppressive agents | Increased risk of lymphomas and other malignancies; Reproductive effects seen in laboratory studies below the MRHD; Excreted in breast milk |
| temazepam | 28:24:08 benzodiazepines | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| teriflunomide | 92:20 immunomodulatory agents | Black box warning on severe hepatotoxicity and teratogenicity including major birth defects |
| testosterone | 68:08 androgens | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| tofacitinib | 92:36 disease modifying antirheumatic drugs | Black box warning for lymphoma and other malignancies |
| topiramate | 28:12.92 anticonvulsants, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| toremifene | 68.16.12 estrogen agonist-antagonist; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| trametinib | 10:00 antineoplastic agents | Embryotoxic and abortifacient at doses less than recommended human dose |
| tretinoin | 84:16 cell stimulants and proliferants | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| triptorelin | 68:18.08 gonadotropins; 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| ulipristal | 68:12 contraceptives | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| <u>urofollitropin</u> | 68:18.00 gonadotropins | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Developmental toxicity |
| valproate/valproic acid | 28:12:92 anticonvulsants, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |

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| Drug | AHFS classification | Supplemental Information |
|------------------------|---|---|
| vemurafenib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| vigabatrin | 28:12:92 anticonvulsants, miscellaneous | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| vismodegib | 10:00 antineoplastic agents | Only met the NIOSH criteria as a developmental and/or reproductive hazard ; Black box warning on embryo-fetal death or severe birth defects; Recommend effective contraception for females during therapy and for seven months after treatment; present in semen; No sperm donation during and three months post-treatment |
| voriconazole | 8:14.08 azoles | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| warfarin | 20:12.04.08 coumarin derivatives | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| zidovudine | 8:18:08 antiretroviral agents | IARC Group 2B |
| ziprasidone | 28:16:08:04 atypical | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| zoledronic acid | 92:24 bone resorption inhibitors | Only met the NIOSH criteria as a developmental and/or reproductive hazard |
| zonisamide | 28:12:92 anticonvulsants, | Only met the NIOSH criteria as a developmental and/or reproductive hazard |

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Changes to the Placement of Drugs on the *List*

This table identifies drugs that were either removed after the 2016 update to the *List* or were placed in a table different than they were placed in the 2016 update to the *List*.

Changes to the placement of drugs from the 2016 *List*.

| Drugs removed from the <i>List</i> | |
|---------------------------------------|--|
| Drug | Notation |
| Bacillus Calmette Guerin (BCG) | BCG was removed from the NIOSH list because it is an infectious agent and not classified as a drug by FDA. For handling recommendations see drug package insert. |
| paliperidone | NIOSH reviewed data from studies provided by the manufacturer and determined it is unlikely that paliperidone poses a carcinogenic, reproductive, or developmental hazard to workers in a healthcare setting and is no longer considered a hazardous drug by NIOSH. |
| pertuzumab | NIOSH reviewed data concerning the developmental effects related to pertuzumab treatment and has determined that it is unlikely that pertuzumab poses a reproductive threat to workers in healthcare settings and is no longer considered a hazardous drug by NIOSH. |
| risperidone | NIOSH reviewed data from studies provided by the manufacturer and determined it is unlikely that risperidone poses a carcinogenic, reproductive, or developmental hazard to workers in a healthcare setting and is no longer considered a hazardous drug by NIOSH. |
| televancin | Televancin was removed from the NIOSH list based on data from reproductive studies provided by the manufacturer concerning its lack of reproductive toxicity. |
| Drugs moved to a different table | |
| Abiraterone | Moved from Table 1 to Table 2 |
| Acitretin | Moved from Table 3 to Table 2 |
| afatinib | Moved from Table 1 to Table 2 |
| Aflibercept | Moved from Table 1 to Table 2 |

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| | |
|---------------------------|-------------------------------|
| Alitretinoin | Moved from Table 3 to Table 2 |
| Anastrozole | Moved from Table 1 to Table 2 |
| axitinib | Moved from Table 1 to Table 2 |
| Azathioprine | Moved from Table 2 to Table 1 |
| Bexarotene | Moved from Table 1 to Table 2 |
| Bicalutamide | Moved from Table 1 to Table 2 |
| Bosentan | Moved from Table 3 to Table 2 |
| Bosutinib | Moved from Table 1 to Table 2 |
| Cabergoline | Moved from Table 3 to Table 2 |
| Cabozantinib | Moved from Table 1 to Table 2 |
| Carfilzomib | Moved from Table 1 to Table 2 |
| Ceizotinib | Moved from Table 1 to Table 2 |
| Cetorelix | Moved from Table 3 to Table 2 |
| Chloramphenicol | Moved from Table 2 to Table 1 |
| Choriogonadotropin | Moved from Table 3 to Table 2 |
| cidofovir | Moved from Table 2 to Table 1 |
| Clomiphene | Moved from Table 3 to Table 2 |
| Clonazepam | Moved from Table 3 to Table 2 |
| Colchicine | Moved from Table 3 to Table 2 |
| Cyclosporine | Moved from Table 2 to Table 1 |
| Dabrafenib | Moved from Table 1 to Table 2 |
| Degarelix | Moved from Table 1 to Table 2 |
| Dexrazoxane | Moved from Table 2 to Table 1 |
| Diethylstilbestrol | Moved from Table 2 to Table 1 |
| Dinoprostone | Moved from Table 3 to Table 2 |

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| | |
|---|-------------------------------|
| Divalproex | Moved from Table 2 to Table 3 |
| Dronedarone | Moved from Table 3 to Table 2 |
| Dutasteride | Moved from Table 3 to Table 2 |
| Emzalutamide | Moved from Table 1 to Table 2 |
| Ergovine/Methylergovine | Moved from Table 3 to Table 2 |
| Eribulin | Moved from Table 1 to Table 2 |
| Erlotinib | Moved from Table 1 to Table 2 |
| Eslicarbazepine | Moved from Table 3 to Table 2 |
| Estrogen-progesterone combinations | Moved from Table 2 to Table 1 |
| Estrogens conjugated | Moved from Table 2 to Table 1 |
| Estrogens; esterified | Moved from Table 2 to Table 1 |
| Exemestane | Moved from Table 1 to Table 2 |
| Finasteride | Moved from Table 3 to Table 2 |
| Fluconazole | Moved from Table 3 to Table 2 |
| Flutamide | Moved from Table 1 to Table 2 |
| Fulvestrant | Moved from Table 1 to Table 2 |
| Ganciclovir | Moved from Table 2 to Table 1 |
| Ganirelix | Moved from Table 3 to Table 2 |
| Goserelin | Moved from Table 1 to Table 2 |
| Histrelin | Moved from Table 1 to Table 2 |
| Icatibant | Moved from Table 3 to Table 2 |
| Lenalidomide | Moved from Table 2 to Table 1 |
| Letrozole | Moved from Table 1 to Table 2 |
| Leuprolide | Moved from Table 1 to Table 2 |
| Lomitapide | Moved from Table 3 to Table 2 |

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| | |
|------------------------------------|-------------------------------|
| Macitentan | Moved from Table 3 to Table 2 |
| Magestrol | Moved from Table 1 to Table 2 |
| Medroxyprogesterone | Moved from Table 2 to Table 2 |
| Menotropins | Moved from Table 3 to Table 2 |
| Methyltestosterone | Moved from Table 3 to Table 2 |
| Mifepristone | Moved from Table 3 to Table 2 |
| Misoprostal | Moved from Table 3 to Table 2 |
| Nafarelin | Moved from Table 3 to Table 2 |
| Nilotinib | Moved from Table 1 to Table 2 |
| Oxytocin | Moved from Table 3 to Table 2 |
| Pamidronate | Moved from Table 3 to Table 2 |
| Paroxetine | Moved from Table 3 to Table 2 |
| Pasireotide | Moved from Table 3 to Table 2 |
| Pazopanib | Moved from Table 1 to Table 2 |
| Peginesatide | Moved from Table 3 to Table 2 |
| Pentetate calcium trisodium | Moved from Table 3 to Table 2 |
| Plerixafor | Moved from Table 3 to Table 2 |
| Ponatinib | Moved from Table 1 to Table 2 |
| Regorafenib | Moved from Table 1 to Table 2 |
| Ribavirin | Moved from Table 3 to Table 2 |
| Riociguat | Moved from Table 3 to Table 2 |
| Sorafenib | Moved from Table 1 to Table 2 |
| Sunitinib | Moved from Table 1 to Table 2 |
| Temazepam | Moved from Table 3 to Table 2 |
| Teriflunomide | Moved from Table 3 to Table 2 |

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| | |
|------------------------|---|
| Testosterone | Moved from Table 3 to Table 2 |
| Thalidomide | Moved from Table 2 to Table 1 |
| Topiramate | Moved from Table 3 to Table 2 |
| Toremifene | Moved from Table 1 to Table 2 |
| Trametinib | Moved from Table 1 to Table 2 |
| Tretinoin | Moved from Table 3 to Table 2 |
| Triptorelin | Moved from Table 1 to Table 2 |
| Ulipristal | Moved from Table 3 to Table 2 |
| Uracil mustard | Moved from Table 2 to Table 1 |
| Valganciclovir | Moved from Table 2 to Table 1 |
| Valproate | Moved from Table 3 to Table 2 |
| Valproic Acid | Moved from Table 3 to Table 2 |
| vemurafenib | Moved from Table 1 to Table 2 |
| Vigabatrin | Moved from Table 3 to Table 2 |
| Voriconazole | Moved from Table 3 to Table 2 |
| Warfarin | Moved from Table 3 to Table 2 |
| Zif-afibercept | Moved from Table 1 to Table 2; now listed as afibercept |
| Ziprasidone | Moved from Table 3 to Table 2 |
| Zoledronic Acid | Moved from Table 3 to Table 2 |
| Zonisamide | Moved from Table 3 to Table 2 |

As noted earlier, in previous iterations of this *List*, Table 5 provided information on recommended exposure controls for hazardous drugs based on formulations. Information about managing risk of exposure can now be found in the draft NIOSH risk management document (Insert link when available).